

**AFFIDAVIT
LOST BOND RECEIPT**

JD-CL-51 Rev. 1-99

**STATE OF CONNECTICUT
SUPERIOR COURT**

www.jud.state.ct.us

INSTRUCTIONS

1. Prepare on typewriter or print legibly.
2. Submit original to clerk of court.

NAME OF CASE (<i>Plaintiff v. Defendant</i>)		DOCKET NO.
TYPE OF COURT <input type="checkbox"/> JUDICIAL DISTRICT <input type="checkbox"/> G.A. NO. _____	ADDRESS OF COURT (<i>No., Street and Town</i>)	DATE
YOUR NAME (<i>Affiant</i>)	YOUR ADDRESS (<i>No., Street, Town, State and Zip</i>)	

AMOUNT OF CASH BOND \$	DATE POSTED	BOND PAGE NO.
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AFFIDAVIT OF LOST BOND RECEIPT

The above-described individual personally appeared before me and, after being duly sworn, deposes as follows:

1. I currently reside at the address indicated above and on the above date I posted a cash bond in the amount shown in connection with the case named above.
2. I have lost the original bond receipt which was presented to me at the time I posted the bond. In the event the original bond receipt is found I will not present it for payment.
3. The bond money has not been returned to me.

I hereby certify that the foregoing statements are true to the best of my knowledge and belief.

IDENTIFICATION SUPPLIED	
TYPE	NUMBER

X

SIGNATURE OF AFFIANT

Subscribed and sworn to before me on:	DATE	SIGNED (<i>Clerk, Deputy Clerk, Commissioner of Superior Court, Notary Public</i>)
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